



Bay Area Prabasi Inc. [www.prabasi.org](http://www.prabasi.org) email: [info@prabasi.org](mailto:info@prabasi.org) Toll-Free: 1-833-BENGALI

**BAY AREA PRABASI BOARD MEMBER APPLICATION FORM**

Name of the Applicant*:
Address:
Email: _____ Contact Number _____
Please list your education, professional, volunteering, community service and leadership background that will benefit the organization Education: _____ Professional Background: _____ Community Service/Volunteering: _____ Leadership: _____
Please list how you want to contribute to the organization during your tenure as a board member
Have you ever served in the Bay Area Prabasi board of director position prior to this term? If so, please mention the year when you served in the board. Yes/No _____ Term (If applicable) _____
I hereby acknowledge that I have carefully reviewed the roles, responsibilities and qualification in the attached "Call to serve" notice and would like to apply for the board of director position for the term: 2022- 2025.  I Agree _____ (Applicant's Date _____ signature) Print, scan and email to <a href="mailto:nec@prabasi.org">nec@prabasi.org</a>

For Office Purpose Only

**Approved**

**Denied**

**\*\* If denied; reason for the denial**

**Additional Comments:**

**Approved By:**

**Date:**

Full Name \_\_\_\_\_ Designation \_\_\_\_\_ Signature \_\_\_\_\_

Full Name \_\_\_\_\_ Designation \_\_\_\_\_ Signature \_\_\_\_\_

Full Name \_\_\_\_\_ Designation \_\_\_\_\_ Signature \_\_\_\_\_